

SERIAL NUMBER 09/060,206	FILING DATE 04/14/98	CLASS 705	GROUP ART UNIT 2761	ATTORNEY DOCKET NO. 17383-3-2
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**APPLICANT**  
MARTIN FRID-NIELSEN, SANTA CRUZ, CA; RICHARD L. SCHWARTZ, PARIS, FRANCE;  
STEVEN R. BOYE, LOSD GATOS, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

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\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

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\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

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FOREIGN FILING LICENSE GRANTED 05/07/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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Verified and Acknowledged  
Examiner's Initials \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
JOHN A SMART  
CORPORATE AFFAIRS DEPT  
BORLAND INTERNATIONAL INC  
1800 GREEN HILLS RD  
SCOTTS VALLEY CA 95066

**TITLE**  
SYSTEM AND METHODS FOR APPOINTMENT RECONCILIATION

<b>FILING FEE RECEIVED</b> \$790	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/060,206	04/14/98	705	2761	17383-3-2

APPLICANT MARTIN FRID-NIELSEN, SANTA CRUZ, CA; RICHARD L. SCHWARTZ, PARIS, FRANCE;  
STEVEN R. BOYE, LOSD GATOS, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

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\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

---

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

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FOREIGN FILING LICENSE GRANTED 05/07/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials _____	Initials _____				

ADDRESS	DAVID N. SLONE, ESQ. TOWNSEND AND TOWNSEND AND CREW LLP TWO EMBARCADERO CENTER, 8TH FLOOR SAN FRANCISCO CA 94111
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TITLE	COMPUTER SYSTEM AND METHOD FOR AUTOMATICALLY REDISTRIBUTING INVESTMENT FUND AMOUNTS
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FILING FEE RECEIVED \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/060,206	04/14/98	705	2761	17363-3-2

APPLICANT MARTIN FRID-NIELSEN, SANTA CRUZ, CA; RICHARD L. SCHWARTZ, PARIS, FRANCE;  
STEVEN R. BOYE, LOS GATOS, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A CON OF 08/649,824 05/17/96 PAT 5,778,346  
WHICH IS A CON OF 07/823,567 01/21/92 PAT 5,519,665

PP or

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

PP or

FOREIGN FILING LICENSE GRANTED 05/07/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no. <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>PP</u>	Examiner's Initials _____ Initials _____				

ADDRESS	DAVID N. SLOANE, ESQ. TOWNSEND AND TOWNSEND AND CREW LLP TWO EMBARCADERO CENTER, 9TH FLOOR SAN FRANCISCO CA 94111	C. George Yu Starfish Software, Inc., 1700 Green Hills Road Scotts Valley CA 95066
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TITLE	COMPUTER SYSTEM AND METHOD FOR AUTOMATICALLY REDISTRIBUTING INVESTMENT FUND AMOUNTS
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FILING FEE RECEIVED \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1/2 Fee <input type="checkbox"/> 1/4 Fee <input type="checkbox"/> 1/12 Fee <input type="checkbox"/> processing Ext. of time <input type="checkbox"/> 1/16 Fee (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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